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Urban health: A framework for Minneapolis

Urban Health is the physical, mental and social well-being of urban residents and communities. Improving health will depend on recognizing and responding to the unique needs of urban environments and their diverse populations.

Cities experience a disproportionate share of the nation's health burden, including greater prevalence of infant mortality, poor nutrition, lead poisoning, asthma, failure to fully immunize children, tuberculosis, sexually transmitted infections, complications from alcohol and drug use, and violent crime.

These realities make a compelling case for addressing urban health in its own right, and combining public health efforts with efforts to address social factors affecting health such as employment, poverty, and education.

Health determinants are factors that influence health. Examples include income, physical environments, social support networks, education and literacy, personal behaviors, cultural beliefs and practices, gender, genetics, and health services. Measurements of health determinants, along with measures of the prevalence of various diseases and conditions, are called health indicators.

An *urban health agenda* is a plan that engages communities to prioritize activities and strategies in order to improve health in an urban environment. The agenda takes into account the link between health and health determinants. The agenda also balances a large number of health needs and builds on the human resources, community assets, and physical amenities cities offer. Although public health departments typically lead these efforts, strategies used to promote an urban health agenda require resources and participation from many other disciplines and areas of expertise in addition to public health.



Urban health in Minneapolis

Health conditions in urban areas such as Minneapolis are affected by a variety of factors, including:

Population density

Minneapolis has a large number of people living and working together. The high density of people, traffic, and businesses can make air, noise, and water pollution a concern. In addition, large numbers of people congregated in small areas can worsen threats to public health because of the more rapid transmission of infectious disease or the greater number of people affected by natural or other disasters.

High population density can also promote building formal and informal networks that respond to people's needs.

Poverty

Among the greatest social challenges of urban areas is pervasive poverty. Poverty is concentrated in certain Minneapolis neighborhoods, increasing the stress level and sense of hopelessness, and decreasing opportunities and resources for the people living in those areas.

Urban resources

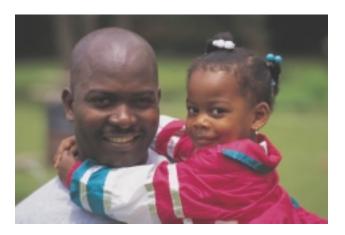
Cities such as Minneapolis are the economic engines of the U.S. economy. Minneapolis generates jobs for people throughout the region. In addition, it has many physical amenities such as parks, lakes, and recreational and cultural facilities that can enrich the quality of life for residents in the city and surrounding communities.

A strong network of health and social service providers is a potential resource for addressing Minneapolis residents' health. Specialized medical services are available, as are social service providers serving needs of specific communities within the city. Safety net services for low-income residents, however, are often overwhelmed and underfunded.

Diversity

Minneapolis is diverse is in terms of the different races, ethnicities, cultures, languages, family structures, sexual orientations, and ages of its residents. Large populations of diverse communities represent different perspectives and life experiences which add to the rich cultural fabric of the city. Communities often form social connections that provide support to their members. These connections can foster community activism, leadership development, and grass roots efforts.

Unfortunately, a history of racial discrimination in this country has had a negative impact on the health of people of color. Eliminating disparities in health demands sustained efforts to overcome this legacy and ensure equal access to quality education, jobs, and health care.



Housing

Minneapolis, like many U.S. cities, has an increasingly older housing stock and other physical amenities. Older housing can add to the charm and character of neighborhoods, but can also pose a risk to people's health. Housing built before 1978 may have lead paint, which can be a health hazard for young children.

A lack of stable and affordable housing can negatively impact community cohesiveness by forcing people to move more often than they want. Neighborhood mobility breaks up social networks, impacts school success, and places individual stresses on families forced to adjust to new environments.

Education

Minneapolis offers many K-12 educational options, including community schooling, charter schools, and private schools. In addition, the city is home to the main campus of the University of Minnesota and a wide array of colleges, technical schools, and other institutions of higher learning.

While a variety of educational opportunities exist, many city residents face challenges in meeting their aspirations. Poverty and lack of quality early childhood experiences may hinder school readiness. The Minneapolis Public Schools are challenged in responding to the diverse needs of all students, including a high proportion who come from families where English is not the primary language. Concentrated poverty and high mobility are also challenges to school success in Minneapolis.

Conditions impacting health are inter-related. For example, the amount of money a family earns determines the quality of housing they can afford and the neighborhood in which they live. Health services may be available, but not culturally appropriate. A person's education level affects their earning potential, and therefore their income, as well as their access to health insurance. These examples illustrate that changing the health of a population requires addressing supports for individuals as well as system improvements.

Minneapolis Department of Health and Family Support

The Minneapolis Department of Health and Family Support (MDHFS) provides leadership in identifying and addressing urban health issues. Local planning and coordination is essential to understand the unique needs and identify the priorities of Minneapolis' diverse communities.

Guiding principles

Urban issues require urban approaches. The following principles guide MDHFS planning efforts:

- Our activities are investments in the health, social, and economic well-being of the citizens of Minneapolis.
- Our work is accomplished through collaborations and partnerships. This is a complex and challenging approach, which is not always efficient in the short-term, but we are committed to nurturing these efforts.
- We recognize and respond to the increasing diversity of our city.
- We work actively to build community capacity, and recognize that incorporating community perspectives and talents enhances our own and that of the City.
- We identify and define outcomes and evaluate and report on results.
- We make decisions about resource allocation based upon sound research or promising strategies.



Successful outcomes for Minneapolis residents require the participation of many City departments, other governmental and quasi-governmental entities, community and neighborhood groups and residents. MDHFS works strategically in partnership with these groups to:

- identify issues of common interest and concern;
- support community voices;
- expand services using existing resources, and build capacity of local agencies;
- develop innovative policy and advocacy strategies;
- manage resources and contracts consistent with City goals and community priorities;
- develop projects that are later sustained in the community.